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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 516997 (4)
1. Corporation Name
TRIESTER INTERNATIONAL REALTY CORPORATION

Principal Place of Business Mailing Address
111 PRESIDENTIAL BOULEVARD, SUITE 230 111 PRESIDENTIAL BOULEVARD, SUITE 230
BALA CYNWYD PA 19004 BALA CYNWYD PA 19004-1004



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/21/1976		3a. Date of Last Report 05/01/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-1697244		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
TRIESTER, STANTON L.
100 & 101 SEABREEZE BOULEVARD
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRIESTER, STANTON L.	1.2 NAME	
STREET ADDRESS	111 PRESIDENTIAL BL, #230	1.3 STREET ADDRESS	
CITY - ST - ZIP	BALA CYNWYD PA	1.4 CITY - ST - ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORSWORTHY, JEAN	2.2 NAME	
STREET ADDRESS	111 PRESIDENTIAL BL, #230	2.3 STREET ADDRESS	
CITY - ST - ZIP	BALA CYNWYD PA	2.4 CITY - ST - ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAISTO, VINCENT	3.2 NAME	
STREET ADDRESS	35 KINGS HIGHWAY EAST	3.3 STREET ADDRESS	
CITY - ST - ZIP	HADDONFIELD NJ	3.4 CITY - ST - ZIP	
TITLE	VP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRIESTER, SONIA C	4.2 NAME	
STREET ADDRESS	35 KINGS HIGHWAY EAST, 112	4.3 STREET ADDRESS	
CITY - ST - ZIP	HADDONFIELD NJ	4.4 CITY - ST - ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARAPUCCI, DENISE	5.2 NAME	
STREET ADDRESS	35 KINGS HWY E	5.3 STREET ADDRESS	
CITY - ST - ZIP	HADDONFIELD NJ	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0007448

CR2E034 (9/96)